



Clinical Integration: PCMV – A Patient Centered Medical Village

Governor's Workforce Investment Board - Health Care Workforce Summit
Preparing for Reform: Health Care 2020
Practitioner Compensation for High Quality Work Panel
BWI Marriott, Linthicum Heights, MD
September 19, 2011

 **BetterNET**SM
Clinically Integrated Network

 **BetterCARE**SM
THP Medical Management

 **BetterME**SM
THP Wellness Services

 **BetterCARE**SM
THP Absence Management

Who We Are

THP TriState Health Partners

P_{HO}

Physician Hospital Organization

230 Community Physicians – PCP and SCP
Board of Directors

- Class I Directors – 4 PCP, 4 SCP
- Class II Directors – 5
- *Ex Officio* – Executive Director, CMO
- Voting – 1 Vote per Class

Meritus Medical Center – 12/11/2010



Clinical Integration

Definition

An active and ongoing program to evaluate and modify the clinical practice patterns of the physician participants so as to create a high degree of mutual interdependence, collaboration and cooperation to ensure quality and control costs.

FTC Advisory Opinion – 4/14/2009

“TriState’s proposed program, while still in the early stages of development in some respects, appears to have the potential to create substantial integration among its participants, with the potential to produce significant efficiencies, including both improved quality and more cost-effective care.”

“It also appears that TriState’s joint negotiation of contracts, including price terms, with payers on behalf of its physician members who will be providing medical services to the payers’ enrollees under those contracts is subordinate and reasonably related to TriState’s members’ procompetitive integration through the proposed program, and appears reasonably necessary to achieve the potential efficiencies of that program.”

The Offering

- ✦ Committed Network - BetterNET
- ✦ Integrated Fee Schedule
- ✦ Value Based Purchasing Program
 - Quality Metrics
 - Citizenship Metrics
 - Efficiency Metrics

Dynamic Quality Metrics – 50 Total

- ✦ Prevention and Screening
- ✦ Respiratory Conditions
- ✦ Cardiovascular Conditions
- ✦ Diabetes – Comprehensive Diabetes Care
- ✦ Musculoskeletal
- ✦ Behavioral Health
- ✦ SCIP Measures (Surgical Care Improvement Project)

Patient Synopsis Report

Clinical Claims Patient Synopsis Report™

Report Run Date: 04/22/2010

Report Time Frame: 04/01/2008 - 04/15/2010

Patient Name: XXXXXXXXXXXXXXXXXXXX
Address: XXXXXXXXXXXXXXXX
Contact Numbers: H: (XXX) XXX-XXXX
PCP: Kerns, William B
First PCP Visit Date: 01/26/2007 99213
Personal Nurse: Smetzer, Guylene

ID: XXXXXXXXXXXX **Gender:** F **Age:** 63 **DOB:** 06/04/1946
XXXXXXXXXX, XX XXXXX **Employer:** Washington County Health Syste
O: (XXX) XXX-XXXX
Contact Number: (301) 824-3343
Last PCP Visit Date: 11/11/2009 99214
Contact Number: (888) 856-8773

Diagnostic Summary - 5 Most Frequent Diagnoses

Total ICD-9 Diagnoses = 32

ICD-9	Description	Duration	Responsible Provider	Encounters
296.33	RECUR MJR DEPRESSIVE SEVERE	04/02/2008 - 09/02/2009	Zook, David (P13884) - PSYCHIATRY	17
459.81	VENOUS INSUFFICIENCY UNSPEC	04/16/2008 - 04/30/2009	Papuchis, Gary (W0417) - CARDIOLOGY	7
250.00	DIABETES UNCOMPL TYPE II	04/15/2008 - 04/14/2009	Datta, Vishal (P13410) - ENDOCRINOLOGY	7
414.01	ATHEROSCLER NATIVE COR ART	08/11/2008 - 02/03/2010	Vaccari, Christopher (P18708) - CARDIOLOGY	5
707.19	ULCER OF OT PART OF LOW LIMB	12/19/2008 - 04/30/2009	Behavioral Health Services (W1050) - PSYCHIATRY	5

ER Encounters = 0

Inpt. Admits. = 1

Prescription History

Last 120 days(208)

Total Prescriptions = 329

Total Unique = 81

Name	#	First Date	Last Date	Provider	DEA#/TaxId
ZETIA TAB 10MG	22	07/18/2008	03/23/2010	KERNS, WILLIAM B MD (AK3211860)	AK3211860
SINGULAIR TAB 10MG	21	08/11/2008	04/05/2010	KERNS, WILLIAM B MD (AK3211860)	AK3211860
NIASPAN TAB 500MG ER	21	08/08/2008	04/05/2010	KERNS, WILLIAM B MD (AK3211860)	AK3211860
CHLORD/CLIDI CAP 5-2.5MG	19	07/21/2008	02/04/2010	KERNS, WILLIAM B MD (AK3211860)	AK3211860
BUPROPN HCL TAB 300MG XL	13	03/30/2009	04/06/2010	WAGNER, MATTHEW G MD (BW0619758)	BW0619758
LANTUS INJ 100/ML	13	03/06/2009	03/26/2010	DATTA, VISHAL MD (BD7715088)	BD7715088

Patient Synopsis Report (con't)

Top 5 Physicians Visited for E&M

Total Physicians = 20

Total E&Ms = 60

TaxId	Name	Specialty	First Date	Last Date	Encounters
522315129	Kerns, William (W0592)	PEDIATRICS	04/16/2008	11/11/2009	9
521385953	Sanicola, Karen (W0383)	PODIATRY	05/06/2008	02/16/2010	6
522315129	Cantone, Vincent (W0187)	PEDIATRICS	10/02/2008	10/29/2008	6
521932860	Iqbal, Shaheen (W0562)	SLEEP DISORDERS	04/24/2008	12/03/2009	5
020789746	Darling, Robert (P12614)	WOUND CARE	09/26/2008	12/05/2008	5

Primary Clinical Indicators

Indicator	Value	Date	Indicator	Value	Date
Height	63"	02/02/2009	Chol. (mg/dL)	129	01/29/2009
Weight (lbs)	291	01/29/2009	HDL (mg/dL)	51	03/20/2009
BMI (kg/m ³)	UNK		LDL (mg/dL)	53	01/29/2010
BP	110/62	01/29/2010	Trig. (mg/dL)	112	01/29/2010
HCT (%)	UNK		HbA1c (%)	8.5	01/29/2010
Creat. (mg/dL)	0.9	03/20/2009			

Preventive Screenings

Colonoscopy	Yes	12/08/2009	PAP	UNK	Mam.	Yes	10/08/2007
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Patient Synopsis Report (con't)

Diabetes, Comprehensive Care (National Standard)

- Patient 18 - 75 years of age that had a HbA1c test in last 12 reported months. YES
- Patient 18 - 75 years of age that had an annual screening test for diabetic retinopathy. YES
- Patient 18 - 75 years of age that had annual screening for nephropathy or evidence of nephropathy. YES
- Patient 18 - 75 years of age with a LDL cholesterol in last 12 months. YES
- Patient 18 - 75 years of age with evidence of good diabetic control, defined as the most recent HbA1c result value less than 7.0%. **NO**
- Patient 18 - 75 years of age with evidence of poor diabetic control, defined as the most recent HbA1c result value greater than 9.0%. NO
- Patient 18 - 75 years of age with most recent LDL result < 100mg/dL. 53

Global Rules

- Adult patient taking a statin-containing medication nicotinic acid or fibric acid derivative that had an annual serum ALT or AST test. YES
- Adult patients persistently taking Angiotensin converting enzyme (ACE) inhibitors or Angiotensin receptor blockers (ARB) who received a serum potassium test AND either a serum creatinine or blood urea nitrogen test within the last 12 reported months (HEDIS criteria). YES

Population Health Report Quality Index - Example

- EBM Compliance – Diabetes Care National Standard (HEDIS); Patient 18-75 years

STANDARD	NO	YES	TOTAL	%
HbA1c last 12 months	218	702	920	57%
Good diabetic control - HbA1c < 9.0%	28	892	920	97%
LDL cholesterol in last 12 months	286	634	920	60%

Population Health Report

Efficiency Index - Example

- ETG: Diabetes w/o complication w/ comorbidity, w/o surgery
 - Encounters: 1,709
 - Avg Cost/Episode – THP \$1,301
 - Avg Cost/Episode – Expected \$1,345
 - Variance (\$44)
 - Extrapolated Variance (\$75,196)
 - CMI: 0.99
 - THP Efficiency Index: 0.97
 - Drill Down: ER, I/P, Ambulatory, Facility, Procedure, Medicine, Labs, Imaging, Pathology, Other Outpatient Services, Rx, E&M

Program Objectives

- Commitment to Triple Aim: Better Care, Better Health, Higher Value
- Focus: Overuse, Misuse, Underuse
- PCP/SCP Aligned Incentives thru VBP/QI Programs
- Local Medical Management, Wellness/Health Coaching and Account Management
- Longitudinal Community Health Record – \$2M Grant
- Physician Integration, Recruitment and Private Practice Preservation Strategy
- Manage Entire Continuum of Care – Pre, Acute, Post
- Supports TPR (Total Patient Revenue) Reimbursement

Questions?

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Full Advisory Opinion:

<http://www.tristatehealth.com/THP/index.aspx>